Application or Docket Number PATENT APPLICATION FOR DETERMINATION RECORD Effective October 1, 2001 **CLAIMS AS FILED - PART I SMALL ENTITY** OTHER THAN (Column 1) (Column 2) TYPE ___ OR SMALL ENTITY **TOTAL CLAIMS** RATE FEE RATE FEE FOR **BASIC FEE** NUMBER FILED NUMBER EXTRA 370.00 BASIC FEE 740.00 OR TOTAL CHARGEABLE CLAIMS minus 20= X\$ 9=X\$18=OR INDEPENDENT CLAIMS minus 3 = X42 =X84= OR **MULTIPLE DEPENDENT CLAIM PRESENT** +140= +280= OR * If the difference in column 1 is less than zero, enter "0" in column 2 TOTAL OR TOTAL **CLAIMS AS AMENDED - PART II** OTHER THAN **SMALL ENTITY** OR SMALL ENTITY (Column 1) (Column 2) (Column 3) **CLAIMS** HIGHEST ADDI-ADDI-REMAINING NUMBER **PRESENT** ENDMENT RATE TIONAL AFTER: **PREVIOUSLY** RATE-TIONAL **EXTRA** AMENDMENT PAID FOR FEE FEE Total Minus X\$18 X\$ 9= OR Independent Minus X42 =X84= OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280€ OR TOTAL TOTAL OR ADDIT, FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST 8 ADDI-ADDI-REMAINING NUMBER PRESENT **AMENDMENT** RATE TIONAL **PREVIOUSLY** RATE TIONAL **AFTER EXTRA** AMENDMENT PAID FOR FEE . FEE Total Minus X\$ 9= X\$18= OR Independent Minus X42= X84 =OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140= +280= OR TOTAL OR ADDIT, FEE ADDIT, FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST ADDI-ADDI-REMAINING NUMBER PRESENT RATE TIONAL RATE TIONAL

AFTER PREVIOUSLY EXTRA AMENDMENT PAID FOR Total Minus Independent Minus *** FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM

X\$ 9= X\$18= OR X42 =X84= OR +140= +280= OR TOTAL TOTAL OR

FEE

FEE

ADDIT, FEE

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

^{*} If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."





Application or Docket Number

PATENT APPLICATION FEE DETERMINATION RECORD

Effective November 10, 1998

CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL ENTITY TYPE OF			OTHER THAN SMALL ENTITY			
FC	OR	NU	IMBER FILED	NUMBER	EXTRA		RATE	FEE]	RATE	FEE
BA	SIC FEE							380.00	OR		760.00
TC	TAL CLAIMS	4	minus	20= * 2 /	<i>,</i> ·		X\$ 9=		OR	X\$18=	3.78
INC	DEPENDENT CI	LAIMS /	minus	3 = * /3			X39=		OR	X78=	1014
ML	ILTIPLE DEPEN	NDENT CLA	IM PRESENT				+130=		OR	+260=	
* If	* If the difference in column 1 is less than zero, enter "0" in column 2						TOTAL		OR	TOTAL	2152
	С	LAIMS A	S AMENDE	D - PART II						OTHER	THAN
		(Column		(Column 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINII AFTER AMENDME	NG .	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDW	Total	*	Minus	**	=		X\$ 9=	Λ	OR	X\$18=	
AME	Independent	*	Minus	***	=		X39=	·	OR	X78=	
	FIRST PRESE	NTATION C	F MULTIPLE DE	PENDENT CLAIM			+130=		OR	+260=	
				•		Ļ	TOTAL		י ו	TOTAL	
						A	DDIT. FEE		OR ,	ADDIT. FEE	
		(Column		(Column 2)	(Column 3)						
AMENDMENT B		CLAIMS REMAINII AFTER AMENDME	NG	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDM	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	=		X39=		OR	X78=	
	FIRST PRESE	NTATION O	F MULTIPLE DE	PENDENT CLAIM			+130=		OR	+260=	
						L	TOTAL DDIT. FEE			TÖTAL ADDIT. FEE	
		(Column	1)	(Column 2)	(Column 3)	^	DDII. FEE I			ADDII. FEEI	
		CLAIMS		HIGHEST	(Column 3)	Г	i				
AMENDMENT C	·	REMAININ AFTER AMENDME		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NDN	Total	*	Minus	**	=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***	=	-	X39=			X78=	
7	FIRST PRESE	NTATION O	F MULTIPLE DE	PENDENT CLAIM		F		·	OR		
, .	f the entry in anim	mn 1 ia lass 4	an the estate and	ima O junia Hori ta	duma C		+130=		OR	+260=	
**	If the "Highest Nui If the "Highest Nu	mber Previous mber Previous	sly Paid For" IN THI sly Paid For" IN TH	umn 2, write "0" in co IS SPACE is less tha IS SPACE is less tha or Independent) is the	in 20, enter "20." an 3, enter "3."		TOTAL DDIT. FEE id in the app	propriate box		TOTAL ADDIT. FEE Jmn 1.	

This Form is for INTERNAL PTO USE ONLY It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER:	

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	<u>x</u>	Fee	Fee		Total
	Sm./Lg.				Sm. Entity	Lg. Entity		760
Basic Filing Fee	201/101	(()					=	760.
Total Claims >20	203/103	Y 1 -20	= 2/	X		18	#	<u> 378</u>
Independent Claims >3	202/102		. 13	X		<u>78</u>	=	1014
Mult. Dep Claim Present	204/104						=	
Surcharge	205/105						=	130
English Translation	139							
TOTAL FEE CALCIU	TION							2282
TOTAL FEE CALCULA	AHON							

Fees due upon	filing	the app	lication
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5 2282 Total Filing Fees Due =

Less Filing Fees Submitted

BALANCE DUE

FORM OIPE-RAM-01 (Rev. 12/97)